Congress of the United States Washington, DC 20515

March 23, 2020

The Honorable Nancy Pelosi Speaker of the House United States House of Representatives H-232, U.S. Capitol Washington, D.C. 20515

The Honorable Mitch McConnell Majority Leader United States Senate S-230, U.S. Capitol Washington, D.C. 20510 The Honorable Kevin McCarthy Minority Leader United States House of Representatives H-204, U.S. Capitol Washington, D.C. 20515

The Honorable Charles Schumer Minority Leader United States Senate S-220, U.S. Capitol Washington, D.C. 20510

Dear Speaker Pelosi, Leader McCarthy, Leader McConnell, and Leader Schumer:

Thank you for your tireless efforts to ensure our nation's health care providers have the resources they need to effectively prepare for and respond to the coronavirus (COVID-19) pandemic. As both chambers continue to work on vital legislation to address this public health crisis and economic fallout, we write to you to highlight a critical flaw in the Medicare telehealth program and ask you to prioritize a solution in forthcoming legislation.

While the Administration has acted to encourage the use of telehealth in order to prevent unnecessary travel and face-to-face interactions, our nation's safety net providers, in rural health clinics (RHCs) and federally qualified community health centers (FQHCs), are currently unable to provide distant site telehealth visits to their patients under Medicare. Until we resolve this, Medicare patients who receive their care from physicians and practitioners in RHCs and FQHCs must physically come into the RHC or FQHC to receive care. At a time when the Centers for Disease Control and Prevention (CDC) is encouraging elderly and higher risk citizens to stay at home and seek care remotely, the status quo is particularly problematic.

The Centers for Medicare and Medicaid Services (CMS) has confirmed to Congressional offices a statutory fix is necessary and the Administration's emergency waiver authority cannot resolve this issue. Thankfully, there is already legislative language in the bicameral and bipartisan CONNECT for Health Act (H.R. 4932, S. 2741). Specifically, Section 7 of this measure would allow physicians and practitioners in RHCs and FQHCs to provide telehealth visits to their patients just like their peers in fee-for-service settings.

We have seen a draft legislative solution which involves establishing a new and specific payment code just for RHCs and FQHCs based on the composite of fee schedule rates instead of paying them through their normal reimbursement mechanisms. However, we fear if done improperly, this composite payment approach could be financially disastrous for RHCs and FQHCs, many of which are already operating on very thin margins.

As we work expeditiously to bolster our nation's capability to defeat the COVID-19 pandemic, it is essential we give safety-net physicians and practitioners the telehealth tools they need to safely provide care.

We appreciate your attention to this important matter and urge you to adopt the language from Section 7 of the CONNECT for Health Act to resolve this flaw. Please do not hesitate to contact our offices if we can answer any questions.

Sincerely,

Tom O'Halleran Member of Congress Adrian Smith Member of Congress

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